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I displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application of Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY (Cotumn 2) OR SMALL ENTITY FOR HUMBER FILED BASIC FEE (37 CFR 1.16(a)) NUMBER EXTRA RATE FEE RATE ·FEE TOTAL CLAIMS OR (37 CFR 1.16(c)) minus 20 = MOEPENDENT CLAIMS **OR** (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR ' Il the difference in column 1 is less than zero, enter "0" in column 2 JATOI OR TOTAL CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) OTHER THAIL OR SMALL ENTITY CLAUS SMALL ENTITY HIGHEST REMAINING NUMBER PRESENT FNDMGND RATE AF TËR ADDI PREVIOUSLY EXTRA RATE ADDI-**ENGLIQUEUT** JAVIOIT PAID FOR TIONAL Folal or cra uses FEE Independent (1) CFR 1,16EB enter obesticity in the factor and the factor and the factor of the fact Minus OP OK: JATOI MIDI ADD'L FEE Of: ADD'L FEE (Column 1) (Calumn 2) (Column 3) CLAILIS HIGHEST REMANUE HUMBER PRESCIII ENT RATE AFTER ADDI RATE PREVIOUSLY EXTRA MAENDIAENT TIONAL PAID FOR TIONAL ENDM Total FEE Minus FEE á Ô 510 100 200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIR (3) CFR 1 (GIO) .180، 36Q OR TOTAL ADD'L FEE OG 400'L FEE (Column 1) (Column 2) CLAMAS HIGHEST CEMAINING NUMBER PRESENT ENT RATE ADDI-JAMOIT AFTER RATE PREVIOUSLY ADDI-AMENDMENT PAID FOR TIONAL, Total (2) CFR 1.14(2) LEE ENDV Minus Independent (1) CFR 1.16(b)) OR Minus = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(df) OB TOTAL TOTAL " If the entry in column 1 is less than the entry in column 7, write "0" in column 3 ADD'L FEE OR ADD'L FEE If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, only "20" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Humber Previously Paid For" (Lotal or Independent) is the highest mumber found in the appropriate box in column 1.